

# Hotel Employee Lost Item Discovery Report

Date of Report

YYYY-MM-DD

Time of Report

HH:MM

Location Found

e.g., Room 201

Employee Name

Full Name

Employee ID / Department

ID / Department

Description of Lost Item

Describe the item, including distinguishing features, color, brand, etc.

Date/Time Found

YYYY-MM-DD / HH:MM

Found By (Name)

Full Name

Details of Discovery

Describe the circumstances of how and where the item was found.

Initial Action Taken

Report to supervisor, item secured, etc.

Employee Signature

Date

Received By (Manager/Security)

Name

Signature / Date